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10:00-11:30

**Tuning up the Triathlete: On Pace for Wellness—Running (Part of 2)**

**Session Description:** Runners sustain overuse injuries at an alarming rate. Overuse injuries often occur due to both extrinsic factors such as training errors and intrinsic factors such as muscle imbalances and biomechanics. In this seminar, the physical therapist will learn the presentations of common overuse injuries that are associated with running. We will then discuss common tests and assessment measures for both factors associated with these injuries. Finally, we will present evidence-based treatment approaches to address the impairments and functional limitations commonly associated with running.

**Learning Objectives:**
1. Recognize impairments seen in injured vs uninjured runners
2. Understand evaluation techniques for evaluation of pathologies associated with running
3. Understand evidence-based treatment strategies for gait retraining, strengthening and treatment progression for the runner

**Bibliographic References:**


**Speakers:**
James Cunningham, PT, DPT, OCS, CSCS, is a physical therapist for the Duke University Health System. He is the current manual therapy fellow-in-training at Duke. Areas of practice interest include the treatment of endurance athletes and injury risk reduction strategies for this population.
Managing Visual and Vestibular Dysfunction in the Home – (Part 1 of 2)

Session Description: Visual and Vestibular deficits are associated with many neurological disorders and with an increased risk of falls. Home health physical therapists encounter these deficits frequently. Assessment and treatment of these systems may provide a challenge in the home. This course will provide an overview of visual and vestibular tests and screens for the home health clinician. The goal is to provide tools that can be utilized in the home to identify vestibular and visual deficits but also to recognize signs and symptoms requiring referral for more specific assessment. Differential diagnosis of causes of vestibular and visual deficits will be discussed. Interventions for visual and vestibular dysfunctions that can be performed in the home will be provided with an opportunity to practice in a lab setting.

Learning Objectives:
1. Describe the anatomy and physiology of the vestibular, visual, and balance systems.
2. Compare and contrast different causes of visual and vestibular dysfunction.
3. Perform a vestibular, visual, and balance examination in the home.
4. Utilize examination results to determine differential diagnosis.
5. Perform an examination and intervention for BPPV.
6. Perform interventions for vestibular, visual, and balance deficits.
7. Apply the information learned to representative patient scenarios.

Bibliographic References:
   Mucha et al. A brief vestibular ocular motor screening assessment to evaluate concussions.
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Speakers:
Dianne Wrisley, PT, PhD, NCS, is an Associate Professor and Director of Post-professional Programs in the Department of Physical Therapy at Wingate University. Dr. Wrisley received her BS in physical therapy from the University at Buffalo, an MS from Old Dominion University and a PhD from the University of Pittsburgh. She completed a post-doctoral fellowship at Oregon Health and Sciences University. She has published numerous articles and has presented at national and international conferences on the evaluation and treatment of patients with vestibular and balance dysfunction. Her research interests include the use of sensory information for balance and novel techniques in the evaluation and treatment of vestibular and balance dysfunction.

Sharan Zirges, PT, MSHA is a physical therapist with 30 years of experience in home health, acute, geriatric, and neurological rehabilitation. Currently she is the program director and assistant professor in the Physical Therapist Assistant Program at South University in Virginia Beach, Virginia. She will be completing her Post-professional DPT at A.T. Still University in June 2016. Sharan has lectured, written and researched on fall prevention, fear of falling, and balance rehabilitation both nationally and internationally.

Michelle Gutierrez, PT, DSc, is a Clinical Assistant Professor at University of Texas at El Paso at the Doctor of Physical Therapy Department. Dr. Gutierrez received her Master’s in Physical Therapy from the University of Texas Medical Branch at Galveston and her Doctor of Science from the University of Alabama Birmingham. Michelle has inpatient and outpatient rehabilitation experience in the El Paso and Las Cruces area, in staff and supervisory capacities. She has experience in a hearing and balance center in Las Cruces pursuing her interest in vestibular rehab. Her most recent clinical experience was at William Beaumont Army Medical Center working with both orthopedically and neurologically involved service members. She has taught continuing education courses for practicing therapists and physicians in Texas, New Mexico and Louisiana. She completed the Vestibular Competency Course in 1998. Michelle was appointed by Governor Bill Richardson to the New Mexico State Licensure 2003-June 2009, holding the office of secretary and president. She is a member of American Physical Therapy Association’s Neurology, Federal, and Orthopedic Sections and has held various elected offices in the Vestibular Rehabilitation Special Interest Group.

Assessing School-aged Children: An Evidence-Based Review

Session Description: Many PTs in all venues to include pediatrics fall into a rut or habit when it comes to selecting assessments. This course will present the most recent evidence for common assessments as well as new assessments. This session will review commonly utilized and most effective assessments for children 3-21 years old, including standardized tests, and some informal ways to benchmark individualized data needs. Participants will work in dyads to discuss assessments using the ICF as a framework. Attendees will participate in discussion of their own
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professional experiences with an eye toward focusing the underlying clinical reasoning using the research. Come and dust off some assessments you have not used in a while or discover a brand new measure to take home with you to use tomorrow!

Learning objectives:
1. Identify SFA, GMFM and GMCFS strengths and weaknesses.
2. Describe how to employ assessment to assess interventions and support service delivery decisions.
3. Identity ICF level for each assessment reviewed.
4. Select appropriate assessment tools for evaluative purpose with sound clinical rationale

Bibliographic References:
GMFCS:

GMFM:

SFA:
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Other assessments:


Speaker:
Laurie Ray has 17 years of experience in school-based practice in North Carolina. Laurie has served North Carolina as the Physical Therapy Consultant for NC Department of Public Instruction (NC DPI) since 2005, Medicaid consultant since 2006 and Adapted Physical Education liaison since 2010. She received her MPT and PhD (in Special Education) from UNC Chapel Hill where she is an Associate Professor for the Division of Physical Therapy.

**Expand Your Professional Horizon through PT Residency and Fellowship Education**

**Session Description:** The number of PT Residency and Fellowship programs accredited has grown exponentially in past decade as more PTs seek advanced training opportunities beyond an entry-level degree. DPT education is focused on foundational knowledge and skills across the scope of PT practice, whereas residency and fellowship programs seek to develop expert clinicians in specialty areas of PT practice. This educational session will provide the learner with information about required components of accredited programs, different learning models available and specific information related to these programs in North Carolina. Current students, recent graduates, and those with years of experience who are interested in learning about the opportunities and benefits of advanced training will walk away with knowledge and tools to explore available options further and decide if residency or fellowship training is right for them.

**Learning Objectives/Outcomes:**
1. Discuss the history and current status of physical therapist advanced training through residency and fellowship education.
2. Describe the required components and types of ABPTRFE-accredited residency and fellowship programs.
3. Identify different working/learning models of currently accredited residency and fellowship programs.
4. Navigate to informational resources to explore residency and fellowship training programs in North Carolina and throughout the United States.

Bibliographic References:

Speakers:
Carla Hill, PT, DPT, OCS, CertMDT is an Assistant Professor in the Division of Physical Therapy at UNC-Chapel Hill and an outpatient orthopedic physical therapist practicing in the UNC system. She has more than 15 years of clinical experience incorporating manual therapy, exercise (including aquatic therapy) and educational interventions to meet patient needs. Carla directs the UNC Orthopedic Physical Therapy Residency program and instructs residents and entry-level DPT students in a variety of musculoskeletal topics. In addition, she teaches a health and wellness class to DPT students that integrates behavior change theories and consideration of psychosocial factors into physical therapy management. She is currently collaborating with researchers at the Thurston Arthritis Research Center on projects related to physical therapy management and the influence of psychosocial factors on symptom and functional movement measures in individuals with knee osteoarthritis.


**Incorporating Rectal Balloon Training as an Adjunct Intervention to the Treatment of Fecal Incontinence and Constipation**

Session Description: The prevalence rates of fecal incontinence (FI) and constipation are 2-24% and 15-20%, respectively. These conditions are commonly treated using dietary modifications, medications, surgery, and biofeedback. A vast majority of the literature examines biofeedback as one of the first-line interventions for treating FI and constipation, with rectal balloon training (RBT) being considered a biofeedback method not commonly investigated. The
use of biofeedback is common practice among pelvic health physical therapists treating a variety of conditions, as it can address strength, sensation, and coordination. Rectal balloon training can improve the rectal sensitivity by training the responsiveness of the sphincter muscles to balloon distention, which facilitates discrimination of smaller rectal volumes or suppressing urgency with larger rectal volumes. More research is being done to investigate the efficacy of RBT while the number of referrals to physical therapists for colorectal conditions continues to climb. It is becoming increasingly more important for pelvic health physical therapists to understand the implementation of RBT as an adjunct to treatment for FI and constipation. This session will highlight RBT as an option physical therapists can use to address altered rectal sensitivity and/or compliance often seen with colorectal disorders, looking at current practice via case studies.

**Learning Objectives:**
1. Understand the difference between symptom presentations associated with intra-rectal hyposensitivity and hypersensitivity.
2. Physical therapist will learn the normative values expected for first sensation, first urge, and maximum tolerance when using rectal balloon therapy.
3. Physical therapist will accurately describe proper safety precautions and infection control management for use of rectal balloon therapy.
4. Physical therapist will understand how to use rectal balloon therapy in treatment of patients with fecal incontinence and constipation symptoms.

**Bibliographic References:**


**Speakers:**
Alexandra Hill, PT, DPT, CLT, graduated from Kent State University with a B.S. in Chemistry, going on to earn her Doctor of Physical Therapy at the University of Florida and complete the Women’s Health Physical Therapy Residency at Duke Health. She is presently a physical therapist at Duke Health, specializing in treating men and women for pelvic health, lymphedema, and oncology rehabilitation. Dr. Hill is a certified lymphedema therapist, and in addition to her clinical work at Duke Health, she is a teaching assistant for the Duke University Doctor of Physical Therapy program. She lectures locally and nationally on topics including pelvic floor dysfunction, lymphedema, physical therapy for the oncology population, and physical therapy for the obstetric patient.
Natalie Sebba, PT, DPT, CWS, is a member of the inaugural class of board certified women’s health specialists and also holds certifications in pelvic floor physical therapy and lymphedema rehabilitation. Prior to board certification, she earned her Doctor of Physical Therapy at Duke University and completed the APTA-credentialed women’s health physical therapy residency at Duke Medicine. Throughout her career, Natalie has served as program coordinator of women’s health and pelvic floor rehabilitation services at several large medical systems across the country. She currently works with the interdisciplinary medical team of Duke Medicine specializing in pelvic health, women’s health and oncology rehabilitation. Dr. Sebba recently completed her position as Chair on the American Board of Physical Therapy Specialties, Women’s Health Specialty Council where she advanced the board certification process and examination for new clinical specialists. She also serves as a clinical mentor with the Duke Medicine Women’s Health Residency program teaching her unique skill set to program residents. Dr. Sebba is an annual lecturer to several programs with Duke Medical School including Physical Therapy and regularly presents at physical therapy conferences.

**1:30-3:30**

**Tuning up the Triathlete: On Pace for Wellness—Biking & Swimming—(Part 2 of 2)**

Swimmers and cyclists also sustain overuse injuries at an alarming rate. Overuse injuries often occur due to both extrinsic factors such as training errors and intrinsic factors such as muscle imbalances and biomechanics. In this seminar, the physical therapist will learn the presentations of common overuse injuries that are associated with swimming and cycling. We will then discuss common tests and assessment measures for both factors associated with these injuries. Finally, we will present evidence-based treatment approaches to address the impairments and functional limitations commonly associated with swimming and cycling.

**Learning Objectives:**
1. Recognize impairments seen in injured vs uninjured swimmers and cyclists
2. Understand evaluation techniques for evaluation of pathologies associated with swimming and cycling
3. Understand evidence-based treatment strategies for movement retraining, strengthening and treatment progression for the swimmer and cyclist

**Bibliographic References:**


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**Speakers:**

James Cunningham PT,DPT,OCS, CSCS, is a physical therapist for the Duke University Health System. He is the current manual therapy fellow-in-training at Duke. Areas of practice interest include the treatment of endurance athletes and injury risk reduction strategies for this population. Outside of clinical practice, James is an avid triathlete and cyclist himself having competed in numerous triathlons of all distances.

Shefali Christopher PT,DPT,SCS,LAT,ATC is a physical therapist for the Duke University Health System. Dr. Christopher specializes in the treatment of endurance athletes, and has presented on numerous occasions on the topics of injury prevention and treatment with this population. Outside of the clinic, she is also an avid runner and triathlete.

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**Managing Visual and Vestibular Dysfunction in the Home – (Part 2 of 2)**

**Session Description:** Visual and Vestibular deficits are associated with many neurological disorders and with an increased risk of falls. Home health physical therapists encounter these deficits frequently. Assessment and treatment of these systems may provide a challenge in the home. This course will provide an overview of visual and vestibular tests and screens for the home health clinician. The goal is to provide tools that can be utilized in the home to identify vestibular and visual deficits but also to recognize signs and symptoms requiring referral for more specific assessment. Differential diagnosis of causes of vestibular and visual deficits will be discussed. Interventions for visual and vestibular dysfunctions that can be performed in the home will be provided with an opportunity to practice in a lab setting.

**Learning Objectives:**

1. Describe the anatomy and physiology of the vestibular, visual, and balance systems.
2. Compare and contrast different causes of visual and vestibular dysfunction.
3. Perform a vestibular, visual, and balance examination in the home.
4. Utilize examination results to determine differential diagnosis.
5. Perform an examination and intervention for BPPV.
6. Perform interventions for vestibular, visual, and balance deficits.
7. Apply the information learned to representative patient scenarios.

**Bibliographic References:**


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   Mucha et al. A brief vestibular ocular motor screening assessment to evaluate concussions.


Speakers:
Dianne Wrisley, PT, PhD, NCS, is an Associate Professor and Director of Post-professional Programs in the Department of Physical Therapy at Wingate University. Dr. Wrisley received her BS in physical therapy from the University at Buffalo, an MS from Old Dominion University and a PhD from the University of Pittsburgh. She completed a post-doctoral fellowship at Oregon Health and Sciences University. She has published numerous articles and has presented at national and international conferences on the evaluation and treatment of patients with vestibular and balance dysfunction. Her research interests include the use of sensory information for balance and novel techniques in the evaluation and treatment of vestibular and balance dysfunction.

Sharan Zirges, PT, MSHA is a physical therapist with 30 years of experience in home health, acute, geriatric, and neurological rehabilitation. Currently she is the program director and assistant professor in the Physical Therapist Assistant Program at South University in Virginia Beach, Virginia. She will be completing her Post-professional DPT at A.T. Still University in June 2016. Sharan has lectured, written and researched on fall prevention, fear of falling, and balance rehabilitation both nationally and internationally.

Michelle Gutierrez, PT, DSc, is a Clinical Assistant Professor at University of Texas at El Paso at the Doctor of Physical Therapy Department. Dr Gutierrez received her Master’s in Physical Therapy from the University of Texas Medical Branch at Galveston and her Doctor of Science from the University of Alabama Birmingham. Michelle has inpatient and outpatient rehabilitation experience in the El Paso and Las Cruces area, in staff and supervisory capacities. She has experience in a hearing and balance center in Las Cruces pursuing her interest in vestibular rehab. Her most recent clinical experience was at William Beaumont Army Medical Center working with both orthopedically and neurologically involved service members. She has taught continuing education courses for practicing therapists and physicians in Texas, New Mexico and Louisiana. She completed the Vestibular Competency Course in 1998. Michelle was appointed by Governor Bill Richardson to the New Mexico State Licensure 2003- June 2009, holding the office of secretary and president. She is a member of American Physical Therapy Association’s Neurology, Federal, and Orthopedic Sections and has held various elected offices in the Vestibular Rehabilitation Special Interest Group.
**The School Bus Meets the Physically Challenged Student**

**Session Description:** Have you ever thought how large a school bus looks to a small child? How about if you could not get your leg up high enough to step up onto the bus...and you were in high school? Have you ever feared rolling forward and backward in your wheelchair as the bus goes down the street? What about when they practice bus evacuations and they never practice with you? Does that mean that you won't be evacuated after a crash? This class will focus on transportation issues and the evidence and clinical reasoning to best work with the physically challenged student in this arena. This presentation will cover different ways to help students with orthopedic and neurologic challenges. Specialty information about transportation issues will enable pediatric PTs and the multi-disciplinary school team to work together for the best independence and accomplishment for special needs students.

**Learning Objectives:**
1. Identify the various ways a PT can help the Transportation Department with transporting orthopedically and neurologically impaired students.
2. Educate PT providers on what Secondary Postural Support Devices are safe to be used on buses.
3. Demonstrate training on loading and unloading ambulatory and wheelchair bound students on the bus.
4. Describe the safest type of wheelchairs available for the bus and how to educate parents of the safety features so important to transporters.
5. Discuss some ways that transporters and PT’s can help each other as we assist physically impaired students onto and off of the school bus.

**Bibliographic References:**


3. Special Needs Require Special Care II: A Guide for the Transportation of Preschoolers and Children with Disabilities for North Carolina Public Schools – June 2008. Listing of the important services PT professionals provide to help students with disabilities safely ride the school bus. (Pg 2-4)

**Speakers:**
Carol Bowes has worked in Pupil Transportation for over twenty years. She first started with routing and scheduling school buses and that led to working with special needs students and transportation. In 2000 Carol earned National Certification as a supervisor of pupil transportation and attended a national conference. During that conference she attended a class on transporting special needs students. She was dismayed to learn what she was doing wrong and determined to change the way she arranged transportation for her students with
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special needs! From that moment on she has attempted to make certain all special needs students are transported safely and correctly on a school bus. Carol is nationally certified as a Director of Pupil Transportation and in 2011 she earned national certification in Transporting Special Needs Students from the National Association of Pupil Transportation. (The sixth person in the nation to earn that certification.) Carol has served on the North Carolina Pupil Transportation Association Board and was President of that organization in 2014-2015. She has worked on the US Department of Education, Bullying Prevention Modules, “See Something, Do Something” and “Creating a Supportive Bus Climate”. She has worked on a national Key Performance Indicators committee as we try to find problems and solutions for pupil transportation across the nation.

Tessa Gentry, PT is the sole physical therapist of the Person County School system. She graduated from the University of North Carolina at Chapel Hill with a Bachelor of Science degree in Physical Therapy in 1994. She has been practicing in the Person County School system for 15 years serving 13 schools and students ranging from 3 to 22 years old. Prior to working in the school system, she practiced in a variety of settings including skilled nursing, acute inpatient, home health, and outpatient orthopedics. In addition to providing physical therapy services, Tessa also works as a coach for the Person High School Drill Team. She lives in Roxboro with her husband and three children – Chase, Cassie, and Courtney.

NCPTA Member versus Nonmember Physical Therapists and Physical Therapist Assistants: Identifying the Value of and Barriers to Membership

Session Description: In 2015, the NCPTA executive council commissioned 3 students and a faculty advisor from Wingate University DPT to elicit feedback and provide recommendations regarding value and perceived barriers to NCPTA/APTA membership from PTs and PTAs. The group developed and implemented a 28 question electronic survey using the web-based software SurveyMonkey. The survey was alpha-tested for content validity, and beta-tested for time completion. The survey was approved as exempt by the Wingate University Research Review Board for Human Subject Protection, and approved by the NCPTA. The survey was sent via email to 10,407 licensees, was opened by 3,197 recipients and 1,112 surveys were completed. The responses were downloaded and analyzed with the assistance of SPSS statistical package. Demographic results and data provided rich content as to characteristics of members versus non-members, contributing factors to a therapist’s decision to become a member of the professional association, and several themes of possible opportunities to increase membership surfaced. The proposed course will report on the survey process, results, trends, and describe contributing factors to membership decisions as identified through statistical analysis. A discussion will follow to allow attendees to ask questions, make suggestions regarding future membership efforts, and consider future research opportunities to aid in removing barriers to membership.

Learning Objectives/Outcomes:
1. Identify common respondent barriers and perceived values to NCPTA/APTA membership.
2. Apply respondent data to future membership recruiting efforts.
3. Discuss future opportunities that can aid in increasing professional membership representation.

**Bibliographic References:**


**Speakers:**
Dr. Kevin Brueilly is Professor and Department Chair of Physical Therapy at Wingate University, near Charlotte. He earned a Bachelor’s degree (Physical Education) from Cedarville University in Ohio, a Master’s of Physical Therapy from the University of St. Augustine in Florida, and a PhD in Education from Texas Tech University in Lubbock. He has more than 20 years of experience as an acute care and wound care physical therapist, most of that time practicing as team leader of rehab services at the Mayo Clinic in Jacksonville, FL. He entered a full-time educational career in 2004 and has taught in the entry-level physical therapy and athletic training programs at Texas Tech, LSU in New Orleans, and as founding Director of Lynchburg College and Wingate University's DPT programs. He has served the Association in many roles, and presently serves as Associate Editor of the Journal of Acute Care Physical Therapy and as your chapter Secretary.

Adrianna Clement, Matt Saunders, and William Stokes are 3rd year DPT students at Wingate University.

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**Post-Partum Rehab for the Female Athlete**
*appropriate for pelvic floor specialists and non-specialist sports/ortho PTs*

**Session Description:** New moms face a multitude of challenges that include rapid physical changes and mental stressors unique to the postpartum period, adjusting to breastfeeding, sleep deprivation, fatigue and sometimes postpartum depression. Many of these factors can both add complexity to progressing an exercise regimen and enrich the benefits of exercise during this time
of transition. This evidence-based course will cover anatomic and motor control changes during and after pregnancy, recent research findings about the unique benefits of exercise to the postpartum woman and her baby, and what the research shows about the relationship between breastfeeding and exercise. Participants will also engage in a practical demonstration of an exercise progression appropriate for the postpartum athlete.

**Learning Objectives:**
1. Understand anatomic, biomechanical, physiologic and motor control changes during and after pregnancy and their effect on exercise and vice versa.
2. Become familiar with recent research findings that demonstrate benefits of exercise unique to the postpartum period and how maternal exercise benefits the child.
3. Understand what the research shows about relationship between breastfeeding and exercise.
4. Become familiar with the early essentials for providing a postpartum exercise progression.

**Bibliographic References:**


**Speaker:**
Dr. Christine Iverson lives in Virginia with her husband and two children, David (b. 2013) and Jane (b. 2015). A lifelong athlete, she ran NCAA Division I cross country and track for the United States Military Academy. Christine graduated from West Point in 2000 and the US Army-Baylor University Doctoral Program in Physical Therapy in 2006. She became specialty board certified in orthopedics in 2010. Christine served as physical therapist for some of the most elite athletes in the US Army—for infantry soldiers for two years, for Special Forces (Green Beret) soldiers for three years. After having her first child in 2013, Christine made it her mission to give new moms everywhere the tools they need to recover after giving birth. She is the author of *Healthy and Quick & Everything Fit, A Step-by-Step Guide to Exercise After Pregnancy*. 
Emerging Concepts in Neuromuscular Control and Pain for Improving Outcomes in Knee Injuries and Osteoarthritis

Session Description: Alterations in CNS motor and sensory processing are emerging as important consequences of acute and chronic knee conditions in addition to the expected biomechanical changes. Adaptive changes in neuromuscular control and pain processing and the impact on function and disability will be presented. Clinical strategies to influence neural excitability and pain sensitization will be discussed. We will provide evidence of the effectiveness of novel and traditional intervention strategies for neuromuscular and pain impairments to improve clinical outcomes for people with knee injuries and osteoarthritis. Research from our own investigations with transcranial magnetic stimulation (TMS), TENS, biofeedback, and quantitative sensory testing will be presented.

Learning Objectives/Outcomes:
1. Summarize the major research findings for inhibition and pain sensitization in people with knee injuries and osteoarthritis.
2. Evaluate evidence between innate traits and wide variations in clinical presentations of pain and disability in patients with knee problems.
3. Apply clinical strategies for influencing quadriceps excitability and pain sensitization to acute and chronic knee conditions.

Bibliographic References:

Speakers:
Deborah L. Givens, PT, PhD, DPT is Professor and Director of the Division of Physical Therapy, UNC Chapel Hill. Dr. Givens investigates the neuromuscular consequences of knee osteoarthritis and interventions to improve quadriceps function. Another current project is focused on the efficacy of prerehabilitation with total knee replacement. Dr. Givens completed her B.S. in Physical Therapy from Virginia Commonwealth University in 1982. Her PhD degree is from the University of Iowa and her MS and DPT degrees are from the MGH Institute of Health.
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Brian Pietrosimone, PhD, ATC is Assistant Professor in the Department of Exercise and Sports Sciences at UNC Chapel Hill. Dr. Pietrosimone’s research is dedicated to improving non-surgical therapeutic management of patients with knee injury and osteoarthritis. His research evaluates the neuromuscular mechanisms related to disability following lower extremity joint injury and seeks to develop novel interventions to treat neuromuscular impairments and improve clinical outcomes. Dr. Pietrosimone graduated with his B.S. in Athletic Training from Springfield College in 2005. He completed his Masters in Athletic Training and his Doctorate in Sports Medicine at the University of Virginia in 2006 and 2009, respectively.

**Yoga for Lower Extremity Rehabilitation**

**Session Description:** A novel approach to rehabilitation for the patient with lower extremity dysfunction uses a yoga based hybrid model. Under this approach, the patient is evaluated in a holistic model under the Medical Therapeutic Yoga Approach. This approach, created by a PT/ATC/yoga instructor Ginger Garner uses a wellness paradigm which includes acknowledging and addressing physical, psycho-emotional-social, spiritual, and energetic health of the patient. This approach is consistent with the World Health Organization's ICF model to consider the external and internal factors that impact, both positively and negatively, the patient's recovery. It differs in that it both identifies and addresses secondary functions such as intellectual needs, communication styles, belief systems, self-reflection and emotional well-being. The yoga approach allows for a combination of both individualized and group therapy through personalized and group yoga sessions. Additionally, yoga incorporates positive coping strategies for recovery through breathing, meditation, self-awareness and mind-body connection. The content of this education session will present a global overview of the Medical Therapeutic Yoga approach, and a tailored road map applied to lower extremity dysfunction. It will include yoga postures, breathing, meditation, home exercise and group yoga components. A case example with outcomes will be presented and

**Learning Objectives:**
1. Explain components of the medical therapeutic yoga approach to rehabilitation within the framework of the pentagon of wellness.
2. Contrast the current standard of care of lower extremity injury recovery with the pentagon of wellness paradigm and individual and group yoga exercise.
3. Appraise the benefits and challenges of the medical therapeutic model through the evaluation of case studies.
4. Experience a group medical therapeutic yoga class to include physical yoga postures, breathing exercises and meditation/relaxation.
5. Formulate through self-reflection, questions and individual planning how medical therapeutic yoga techniques or paradigms may fit into the participants existing clinical practice.

**Bibliographic References:**


Speakers:
Elizabeth Regan, PT, DPT, OCS, is a physical therapist and yoga teacher and enjoys the blend of both perspectives in educating clients and students in wellness and rehabilitation. She received her yoga teacher training in 2004, her Doctorate in Physical Therapy in 2005 from Elon University and her Orthopedic Specialty Certification in physical therapy in 2008. She has worked in physical therapy in an outpatient spine clinic, a hospital based general outpatient clinic and recently as the Director of Clinical Education at Wingate University’s Doctor of Physical Therapy program. She has taught yoga to patients, and held regular weekly classes in Charlotte. Additionally, she has shared anatomy, kinesiology and injury prevention awareness training to yoga teachers in teacher trainings across the Charlotte area. Elizabeth has 2 small children and enjoys running after them, running for exercise and her own yoga practice. She actively volunteers physical therapy services at the Matthews Free Medical Clinic and provides wellness education for grieving military families through Operation Support Our Troops.

Christine Roper, PT, originally from Pennsylvania, holds a B.S. in Sports Medicine, Athletic Training from Mercyhurst College and a Masters in Physical Therapy from the University of Miami School of Medicine. She is an expert practitioner of myofascial release, completing her training under John Barnes, PT, LMT, NCTMB and is a graduate of the Professional Yoga Therapy Institute for healthcare professionals studying under Ginger Garner PT, ATC, ERYT-500. Christine currently has over 1500 hours of training in medical therapeutic yoga. Christine worked
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for the Carolinas Healthcare Center for 10 years providing valuable experience in both outpatient rehabilitation and orthopedics and managed the outpatient department for a portion of these years. Following her passion for providing quality care to her patients, Christine opened her own physical therapy practice in 2003 offering individualized treatment plans incorporating myofascial release. In 2012, she joined forces with her friend and colleague adding a medical based, biomechanically sound yoga program known as Professional Yoga Therapy Approach. Christine has found success in helping her patients heal and achieve better quality of life by combining her expertise in myofascial release, physical therapy and knowledge of medical based yoga.

Christine has been a guest speaker covering topics surrounding medical based yoga and myofascial release for the physical therapy departments of the University of Miami, Miami, FL, Wingate University and Central Piedmont Community College located in Charlotte, NC. She has enjoyed being an educator and facilitator of medical based yoga to several mid-sized companies within the Charlotte area in addition to local community partners including the Arthritis Foundation of North Carolina, the Aquatic Team of Mecklenburg County (Team ATOM) and the Hornet’s Nest Girl Scouts.

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**Pediatric Fitness and Beyond, through Community Outreach**

**Session Description:**

**Learning Objectives:**

**Bibliographic References:**

**Speakers:**

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**A Doctorate Profession: 3 Keys to Creating Your Professional Identity**

**Session Description:** As doctorate level healthcare professionals, it is imperative that PTs understand how to document their career path and market themselves to colleagues and consumers. The field of professional branding and career documentation is changing dramatically and it is vital to understand current market demands and conditions to remain relevant. Professional identity is documented strategically through Curriculum Vitae (CVs), resumes, and social media. This course will focus on determining individual career focus and creating the supporting documents that detail career achievements and accomplishments. After attending the education session, the attendee will understand the importance of creating a professional identity and the current market standards and demands. In addition, they will have the strategies and formats to create a CV and resume, understand when to utilize a CV vs. a
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Resume, and how to develop an appropriate social media presence. This session will position each therapist to move forward in their personal career and advance the profession of physical therapy.

Learning Objectives/Outcomes:
1. Create a personal professional branding statement, CV, resume, and LinkedIn profile.
2. Describe the current standards and climate regarding career documentation and advancement.
3. Understand the difference between a curriculum vitae (CV) and a resume and when it is appropriate to utilize each document.
4. Describe the growing importance of social media in professional identity.

Bibliographic References

2. Enelow W, Kursmark L. Expert Resumes: Health Care Careers. Indianapolis, IN: JIST Works; 2010


Speaker:
Donna Lampke, PT, DPT, CPRW, ACRW, received her physical therapy degree from the University of North Carolina at Chapel Hill and her doctorate in physical therapy from Alabama State University. She has twenty-six years of acute care experience as well as experience in home health, outpatient, and long term care. She currently works at Carolinas Medical Center and specializes in the treatment of trauma, critical care, and orthopedic patients. She is the department representative and resource for career development and advancement. In addition to her work as a physical therapist, Donna has 2 prestigious national certifications in resume writing and specializes in writing healthcare resumes and CV’s. She is considered to be “expert in field” in career development and marketing for healthcare professionals.

Sexual Health Issues in Cancer Survivors
Learning Objectives:
1. Understand the design and purpose of a multidisciplinary clinic for sexual health for cancer survivors.
2. Discuss the most common sexual dysfunctions seen in cancer survivors.
3. Describe the role of physical therapy for sexual health for patients for cancer survivors.

Session Description: Sexual Health concerns are often overlooked in survivors and this can impact both the emotional and socio-economic status of cancer survivors. This presentation will discuss the common sexual health dysfunction seen in cancer survivors and the impact physical therapy can make in addressing these issues. A multi-disciplinary clinic design can be an effective way to efficiently address all the aspects of sexual health in this patient population. An individual's sexual response can be affected in a number of ways that involves the physical, psychological, interpersonal, and behavioral aspects of a person. The most common sexual problems for people who have cancer are loss of desire for sexual activity in both men and women, problems achieving and maintaining an erection in men, and pain with intercourse in women. Unlike many other physiological side effects of cancer treatment, sexual problems do not tend to resolve within the first year or two of disease-free survival; rather, they may remain constant and fairly severe or even continue to increase. Attendees will receive an overview of sexual dysfunction in cancer survivors, the role of the physical therapist in treating these issues, and share in the experience of a multi-disciplinary sexual health clinic.

Bibliographic References:


NCPTA 2016 Fall Conference Agenda
Saturday, October 15, 2016


Speaker:
Lisa Massa, PT, WCS, CLT, graduated from the University of Pittsburgh. Presently she is a Rehab Services Coordinator and Co-Director of the Women's Health Physical Therapy Residency at Duke University Health System. Her clinical practice area is oncology and women's health. She has presented multiple lectures nationally on a variety of women's health and oncology topics.